Japanese Society for Cutaneous Immunology and Allergy: CONFLICT OF INTEREST NOTIFICATION FORM

Manuscript Title:

(To be signed by each author––photocopies accepted)

It is the responsibility of all authors to disclose in publishable detail all financial and personal affiliations current, over the past three years and during the period of the study relevant to this manuscript that could pose a conflict of interest. Potential conflict of interest is deemed to exist where an author has a financial interest in an entity that may derive either financial benefit or detriment as a result of the deliberations set out in or the conclusions drawn from the work. Such financial interest may be either direct (as where an author is a shareholder\*, officer, trustee, employee or consultant of or is a recipient of funds for research, fellowship, travel grants, fees for speaking, fees for arranging education, fees for consulting or funds for a staff member from such an entity) or indirect (where an author is the spouse, de facto partner, child or parent of another person or persons so affiliated). \*This does not include blind shares such as unit trusts or superannuation schemes where sale or purchase of shares is not under the control of the owner of the shares.

Information provided will be treated as strictly confidential and will not influence the review process but if the manuscript is accepted for publication the editor reserves the right to determine how such information is to be disclosed and to publish information about conflict of interest provided by authors where deemed important for readers in evaluating the material presented in the manuscript.

**Please answer all the following questions that are designed to identify conflict of interest. Provide additional details, where necessary, in the accompanying letter.**

**1. (i) Have you accepted from a sponsor, pharmaceutical company or other organization (circle Yes or No as appropriate)**

* Funds for research?.................................................................................... Yes / No
* Consultancy fee or commissioned fee paid work?..................................... Yes / No
* A fellowship, research grant or education grant?.....................................Yes / No.
* Fee for speaking? ………………………………………………………………Yes / No
* Fee for arranging education?................................................................…Yes / No
* Conference registration fees and/or travel or accommodation expenses?..Yes / No
* Funds for a staff member? ………………………………………….………Yes / No

**(ii) Do you hold any stock or shares in any entity that may gain financial benefit or detriment as a result of the deliberations set out in or the conclusions of the study (circle Yes or No as appropriate)**

* Directly?....................................................................................................Yes / No
* Indirectly, via a spouse, de facto partner, child or parent?.................... Yes / No

**2. Have potential conflicts of interest, where present, been disclosed to the study participants?.**..............Yes / No

**3. If none of the above apply and there is no conflict of interest please clearly state this. I certify that there are no financial or personal relationships between myself and others that could bias the work set out in the manuscript.**

Name/ Signature Date

**4. With respect to a funded/sponsored study, has the funding source had participation in (circle Yes or No as appropriate)**

* Study design?........................................................................................... Yes / No
* Collection, analysis and interpretation of the data?...............................Yes / No
* Writing of the report?................................................................................ Yes / No
* Decision to submit report for publication? …………………….………….. Yes / No

**5. As an author (circle Yes or No as appropriate)**

* Did you have full access to all data in this study?.................................. Yes / No / No
* Are you prepared to take full responsibility for its accuracy?................Yes / No / No

Name/ Signature Date